

# Application to Register as a Fund-raising Counsel

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click on area to type information in and tab to move to next question

1. Name \_\_\_\_\_
2. The applicant is a:  
    corporation  
    partnership  
    individual
3. Has the applicant ever been known under any name other than that given above?  
    yes  
    no  
    If yes, list each such name:

4. Address

If address is not in Maryland, give principal Maryland address, if any, where financial records are kept:

5. Telephone \_\_\_\_\_ FAX: \_\_\_\_\_ E-mail: \_\_\_\_\_  
    Federal ID or Social Security No. \_\_\_\_\_

6. List all Officers, Directors or Partners

Name	Title	Residential Address
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7. List person(s) having more than a 5% financial interest or ownership

Name	Residential Address	(%) Nature of Interest
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8. Does the applicant (or any member thereof) have a financial interest in any other agency or in any business of like nature (including charitable organizations)?

yes

no \_\_\_\_\_

If yes, provide details:

9. When and where was the applicant organized to do business?

Month, day, year \_\_\_\_\_ State \_\_\_\_\_

10. Has the applicant had any license, registration or permit denied, canceled or revoked, or is any such action pending?

yes

no

If yes, provide following information:

Name & Address of

Government Agency

Nature of Action

Date

11. Has the applicant ever been enjoined or prohibited from soliciting contributions in any state, including Maryland either personally or as a principal of another entity?

yes

no

If yes, please explain:

12. Has the applicant ever been licensed or held a certificate as a fund-raiser counsel (or professional solicitor) in any other state(s)?

yes

no

If yes, please list states and dates licensed:

13. List the names and addresses of all charitable organizations with which the applicant has contracts to act as a fund-raising counsel in Maryland. Attach copies of all current contracts.
14. List the names and addresses of all individuals or organizations with which the applicant has subcontracts and the subcontracting agreement furthers the purpose of the agreement between the solicitor and the charity. Attach copies of all current contracts.
15. Does any contract between the applicant and a client charitable organization provide for the use of a cashiering or caging entity for receipt of contributions? If so, list the charity below and include a copy of the cashier or cage ontract.
16. Check One.
- All taxes due from the applicant to the State or Baltimore City or a county of the State for the preceding fiscal year have been paid, and all taxes the applicant was required to collect and pay over to the State or to Baltimore City or a county of the State for the preceding fiscal year have been collected and paid over.
- The taxes due from the applicant to the State or to Baltimore City or a county of the State are under dispute and the dispute has not been finally resolved.

I hereby consent to the jurisdiction and venue of the Circuit Court of Anne Arundel County in Maryland in actions brought under the Business Regulation Article, Title 6 of the Annotated Code of Maryland, Charitable organizations and Charitable Representative

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## **Affidavit**

I solemnly affirm under the penalties of perjury and upon personal knowledge that the contents of the foregoing paper are true.

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(Type or Print) Name of President, Chair or Principal Officer

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Signature of President, Chair or Principal Officer

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### **Necessary Attachments:**

1. A copy of any written agreeemnt or contract entered into between fund-raising counsel and charitable organization. If there are no current contracts, send sample copy of the contract you propose to use.
2. A check or money order in the amount of \$200 payable to the Secretary of State.
3. Cage or cashier agreements.

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**Only a form issued by the Office of the Secretary of State or printed directly from the Internet will be accepted by the Office of the Secretary of State.**